	SBIR/STTR Information	OMB Number: 0925-0001
* Program	Type (select only one)	Expiration Date: 09/30/2007
SBIR	STTR	
Both (	See agency-specific instructions to determine whether a particular agency allows a single submission for both SBIR.	and STTR)
Phase I	IR Type (select only one)  Phase II	
F asi-iia	ck (See agency-specific instructions to determine whether a particular agency participates in Fast-Track)	**
V/	restions 1-7 must be completed by all SBIR and STTR Applicants:	
Yes No	* 1. Do you certify that at the time of award your organization will meet the eligibility criteria for a small business opportunity announcement?	as defined in the funding
Yes	* 2. Does this application include subcontracts with Federal laboratories or any other Federal Government agenci	es?
□ No	* If yes, insert the names of the Federal laboratories/agencies;	
Yes No	* 3. Are you located in a HUBZone? To find out if your business is in a HUBZone, use the mapping utility provided by the Small Business Administration at its web site: http://www.sba.gov	
Yes	* 4. Will all research and development on the project be performed in its entirety in the United States?	
☐ No	If no, provide an explanation in an attached file.	
	#1999 Miles (#1992)	iew Attachment
☐ Yes ☐ No	* 5. Has the applicant and/or Program Director/Principal Investigator submitted proposals for essentially equivaler Federal program solicitations or received other Federal awards for essentially equivalent work?  * If yes, insert the names of the other Federal agencies:	nt work under other
Yes	*6. Disclosure Permission Statement: If this application does not result in an award, is the Government permit your proposed project, and the name, address, telephone number and e-mail address of the official signing for the to organizations that may be interested in contacting you for further information (e.g., possible collaborations, invi-	e applicant organization,
	* 7. Commercialization Plan: If you are submitting a Phase II or Phase II Phase II Fast Track Application, includ Plan in accordance with the agency announcement and/or agency-specific instructions.	le a Commercialization
		View Attachment

## OMB Number: 0925-0001 SBIR/STTR Information Expiration Date: 09/30/2007 SBIR-Specific Questions: Questions 8 and 9 apply only to SBIR applications. If you are submitting ONLY an STTR application, leave questions 8 and 9 blank and proceed to Yes \*8. Have you received SBIR Phase II awards from the Federal Government? If yes, provide a company commercialization history in accordance with agency specific instructions using this Atlachment. ■ No Yes \* 9. Will the Project Director/Principal Investigator have his/her primary employment with the small business at the time of award? ■ No STTR-Specific Questions: Questions 10 and 11 apply only to STTR applications. If you are submitting ONLY an SBIR application, leave questions 10 and 11 blank. \* 10. Please indicate whether the answer to BOTH of the following questions is TRUE: ■ No (1) Does the Project Director/Principal Investigator have a formal appointment or commitment either with the small business directly (a) Does the Topic Decount integral investigator have a format appointment or communities with the small business the (as an employee or a contractor) OR as an employee or a contractor) OR as an employee or a contractor. OR as an employee of the Research Institution, which in turn has made a commitment to the small business through the STTR application process; AND (2) Has the Project Director/Principal Investigator devoted at least 10% effort to the proposed project? \* 11. In the joint research and development proposed in this project, does the small business perform at least 40% of the work and the research institution named in the application perform at least 30% of the work?